_ §41S

IDAHO S CORPORATION INCOME TAX RETURN

2008

10-02-08							S	state use	only	
AMENDED RETURN, check the box. See instructions, page 10 for the reasons	For calendar year Mo	o Day	Year	1	Mo Day	Year				
for amending and enter the number.	year beginning		80	ending						
Business name	Stat	te use only			Feder	al employer id	entification nu	ımber		
Business mailing address										
Dusiness maining address										
City, State and Zip Code				Do you need	I Idaho incom	no tay				NI-
					to you next			35 •	Ш	No
1. Did the corporate name change? If yes, er	nter the previous nam	e					☐ Ye		П	No
2. If a federal audit was finalized this year, ent	· ·								ш	
3. Is this an inactive corporation or nameholde	•						Ye	es •		No
4. a. Were federal quarterly estimated paymen									\Box	No
b. Were quarterly estimated payments base								es •	Ħ	No
5. Is this a final return?									H	No
If yes, check the proper box below and enter										
Withdrawn from Idaho Dissolve					Enter ne					
6. Is this an electrical or telephone utility?		•	_				Y	es •		No
7. Did the ownership change during the year?								es •	H	No
8. Enter the amount of credit for qualifying nev								,0	ш	110
Enter the amount of investment tax credit e		-								
Enter the amount of broadband equipment	-									
Enter the amount of credit for Idaho research			•							
12. Enter the amount of biofuel infrastructure in		-								
13. Did you claim the property tax exemption for			•					es •		No
INCOME	investment tax cred	iii property	y acc	unca uno	tax year:			,3 -	<u> </u>	110
	. 1					- 11				
14. Ordinary income (loss). Form 1120S, page 1										
15. Net income (loss) from rental real estate activities. Form 1120S, Schedule K										
16 Net income (loss) from other rental activities. Form 1120S, Schedule K										
17. Portfolio income (loss). Form 1120S, Schedule K										
19. Net distributable income. Add lines 14 thro	ugn 18					19				
ADDITIONS										
20. Interest and dividends not taxable under Internal Revenue Code										
23. Add lines 19 through 22						23	//////	////	///	111
SUBTRACTIONS							//////	////		111
24. Interest from Idaho municipal securities							/////	////		
25. Interest on U.S. Government obligations. A										
26. Interest and other expenses related to lines			_			7//	//////	////	111	111
27. Add lines 24 and 25, and subtract line 26						27				
28. Technological equipment donation						• 28	11111		///	///
29. Allocated income. Attach a schedule									///	111
30. Interest and other expenses related to line								////	///	///
31. Subtract line 30 from line 29						31				
32. Bonus depreciation. Attach computations										
33. Other subtractions										
34. Total subtractions. Add lines 27, 28, 31, 32	and 33					34				
35. Net business income subject to apportionm	ent. Subtract line 34	from line	23			• 35				

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise ID 83756-0056 ATTACH A COMPLETE COPY OF YOUR FEDERAL FORM 1120S.



	EFO00028p2 10-02-08							Form 41S - Page 2
ı	36. Net business income subject to appor	rtionme	nt. Enter the amou	int from	line 35		36	
	37. Corporations with all activity in Idaho	enter 1	00%. Multistate/mu	ultinatio	nal corporations			
complete and attach Form 42. Enter the apportionment factor from Form 42, Part I, line 21							37	%
38. Net business income apportioned to Idaho. Multiply line 36 by the percent on line 37							38	
39. Income allocated to Idaho. See instructions							39	
	40. Idaho compensation of individual office							
	to Idaho				=		40	
	41. S corporation income reported to Idah							
	42. Idaho taxable income. Add lines 38 th							
	42. Idano taxable income. 7dd inies so ti	nougn	To, and Subtract iii	10 +1			72	
43. ld	aho income tax. Multiply line 42 by 7.6%						43	
CRED							/////	///////////////////////////////////////
	edit for contributions to Idaho educational e	ntities			14			///////////////////////////////////////
	edit for contributions to Idaho youth and reh			-	_			
	otal business income tax credits from Form 4			····· - -	+0			
				l.	40			
	tach Form 44			_	46		47	(//////////////////////////////////////
	otal credits. Add lines 44 through 46						47	
	ubtract line 47 from line 43. If line 47 is grea	iter tha	n line 43, enter zero	<u> </u>			48	
OTHE	R TAXES							
49. M	inimum tax. See instructions if the S corpor	ation o	wes federal tax				49	20
50. Pe	ermanent building fund tax. See instructions	3					50	
51. To	1. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Attach Form 44						51	
52. Fu	uels tax due. Attach Form 75						52	
	ales/Use tax due on mail order, internet, and						53	
	ix from recapture of qualified investment exe							
	otal tax. Add lines 48 through 54							
	nderpayment interest. Attach Form 41ESR.							
	dd line 55 and line 56						57	
							31	
	ENTS AND OTHER CREDITS						50	
	58. Estimated tax payments						58	
	pecial fuels tax refund G						59	
60. To	tal payments and other credits. Add line 58	and lir	ıe 59				60	
If	line 57 is more than than line 60, GO TO	LINE 6	1. If line 57 is less	s than	line 60, GO TO LIN	E 64.		
PEFII	ND OR PAYMENT DUE							
	ix due. Subtract line 60 from line 57					_	61	
							61	
62. P	enalty • Interest from	due da	.e •		Enter total		62	
63 T	OTAL DUE. Add line 61 and line 62							
00. 10	TAL DOL. Add line of and line oz							
64. O	verpayment. Subtract line 57 from line 60						64	
65. R	EFUND. Amount of line 64 you want refund	ed to y	ou		······································			
66 E	STIMATED TAX. Amount to credit to your 20	NN9 est	imated tax Subtrac	ct line 6	35 from line 64	_	66	
							00	
	IDED RETURN ONLY. Complete this so		-				0.7	
67. Total due (line 63) or overpayment (line 64) on this return							67	
68. Refund from original return plus additional refunds							68	
69. Tax paid with original return plus additional tax paid							69	
70. Aı	mended tax due or refund. Add lines 67 and						70	
•	Within 180 days of receiving this return, the Ida Under penalties of perjury, I declare that to the							
SIGN	Signature of officer ■		Date					
HERE	Title		Phone number	\dashv				
				_				
Paid pre	parer's signature	Preparer's	EIN, SSN or PTIN					
Address	and phone number			\dashv				
, wu coo	and phone number			1				

